[Your Name/Organization Name]
[Your Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Insurance Company Name]
[Claims/Audit Department Address]
[City, State, Zip Code]

RE: Response to Audit Request for Substantiation Records
Policy Number: [Policy Number]
Audit Reference Number: [Reference Number]
Date of Audit Request: [Date on Request Letter]

To [Name of Auditor or Department],

I am writing in response to your request dated [Date of Request] regarding the audit of [Insurance Type, e.g., Workers' Compensation/General Liability] for the period of [Start Date] to [End Date].

As requested, I have enclosed the necessary substantiation records to verify the information reported for this audit period. The attached documentation includes:

- [Item 1: e.g., Payroll Summaries/Reports]
- [Item 2: e.g., Federal Tax Forms (941/940)]
- [Item 3: e.g., Certificates of Insurance for Subcontractors]
- [Item 4: e.g., General Ledger reports]
- [Item 5: e.g., Business Financial Statements]

We have made every effort to ensure these records are complete and accurate according to your requirements. Please review these documents and let us know if any further clarification or additional information is needed to finalize the audit.

Please confirm receipt of these documents. You may reach me directly at [Your Phone Number] or via email at [Your Email Address] if you have any questions.

Sincerely,

[Your Signature]

[Your Printed Name]
[Your Title/Position]

Enclosures: [List number of pages or specific document names]